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REQUEST

CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Address to: Commissioner for Patents Box RCE Washington, DC 20231

llection of information unless it	displays a valid OMB control/number.	
Application Number	09/805,416	
Filing Date	03/13/01	
First Named Inventor	Kent H. HARLE et al.	
Art Unit	3611	
Examiner Name	Boehler, Anne Marie	
Attorney Docket Number	30235-2	

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission red	quired under 37 CFR 1.114		
ii. Consid	der the amendment(s)/reply under 37 CFR 1 intered amendment(s) referred to above will be entered).	1.116 previously filed oneply Brief previously filed on	
• b. ✓ Enclosed		Pr.	
	dment/Reply iii.	Information Discrete Statement (IDS)	
Affida	vit(s)/Declaration(s) iv.	Other Petition for Extension of the re Response to OA	
2. Miscellaneous]	GPA 22000	
a. Suspension of action on the above-identified application is requested under 1.103(c) for a			
_	months. (Period of suspension shall not e	exceed 3 months; Fee under 37 CFR 1.17(i) engined)	
b. U Other _			
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.			
a. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 50-2298 (Luce, Forward, Hamilton & Scripps LLP)			
:: =	ee required under 37 CFR 1.17(e)	07/01/2003 AWONDAF1 00000102 09805416	
iii. Other	sion of time fee (37 CFR 1.136 and 1.17)	01 FC:2801 375.00 OP	
7. —			
- CHOOK III II	ne amount of \$375.00 enclosed		
c. Payment by credit card (Form PTO-2038 enclosed)			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
	SIGNATURE OF APPLICANT, ATTOR	RNEY, OR AGENT REQUIRED	
Name (Print /Type)	Peter R. Martinez, Esq.	Registration No. (Attorney/Agent) 42,845	
Signature	7////	Date June 26, 2003	
CERTIFICATE OF MAILING OR TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as frst class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.			
Name (Print/Type)	Joyce Vogel		
Signature		Date	
Burden Hour Statement: Th	is form is estimated to take 0.2 hours to complete. Time will	Il vary depending upon the needs of the individual case. Any comments on the	